

□ 1510

Mrs. BLACK changed her vote from “nay” to “yea.”

So the motion to instruct was agreed to.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

THE JOURNAL

The SPEAKER pro tempore. The unfinished business is the question on agreeing to the Speaker's approval of the Journal, which the Chair will put de novo.

The question is on the Speaker's approval of the Journal.

Pursuant to clause 1, rule I, the Journal stands approved.

APPOINTMENT OF CONFEREES ON H.R. 3080, WATER RESOURCES REFORM AND DEVELOPMENT ACT

The SPEAKER pro tempore. Without objection, the Chair appoints the following conferees on H.R. 3080:

From the Committee on Transportation and Infrastructure, for consideration of the House bill and the Senate amendment, and modifications committed to conference:

Messrs. SHUSTER, DUNCAN of Tennessee, LOBIONDO, GRAVES of Georgia, Mrs. CAPITO, Mrs. MILLER of Michigan, Messrs. HUNTER, BUCSHON, GIBBS, HANNA, WEBSTER of Florida, RICE of South Carolina, MULLIN, RODNEY DAVIS of Illinois, RAHALL, DEFazio, Mses. BROWN of Florida, EDDIE BERNICE JOHNSON of Texas, Mr. BISHOP of New York, Ms. EDWARDS, Mr. GARAMENDI, Ms. HAHN, Mr. NOLAN, Ms. FRANKEL of Florida, and Mrs. BUSTOS.

From the Committee on Natural Resources, for consideration of secs. 103, 115, 144, 146, and 220 of the House bill, and secs. 2017, 2027, 2028, 2033, 2051, 3005, 5002, 5003, 5005, 5007, 5012, 5018, 5020, title XII, and sec. 13002 of the Senate amendment, and modifications committed to conference:

Messrs. HASTINGS of Washington, BISHOP of Utah, and Mrs. NAPOLITANO.

There was no objection.

□ 1515

SMALL AIRPLANE REVITALIZATION ACT OF 2013

Mr. POMPEO. Mr. Speaker, I ask unanimous consent to take from the Speaker's table the bill (H.R. 1848) to ensure that the Federal Aviation Administration advances the safety of small airplanes, and the continued development of the general aviation industry, and for other purposes, with the Senate amendment thereto, and concur in the Senate amendment.

The Clerk read the title of the bill.

The SPEAKER pro tempore. The Clerk will report the Senate amendment.

The Clerk read as follows:

Senate amendment:

Strike out all after the enacting clause and insert:

SECTION 1. SHORT TITLE.

This Act may be cited as the “Small Airplane Revitalization Act of 2013”.

SEC. 2. FINDINGS.

Congress makes the following findings:

(1) A healthy small aircraft industry is integral to economic growth and to maintaining an effective transportation infrastructure for communities and countries around the world.

(2) Small airplanes comprise nearly 90 percent of general aviation aircraft certified by the Federal Aviation Administration.

(3) General aviation provides for the cultivation of a workforce of engineers, manufacturing and maintenance professionals, and pilots who secure the economic success and defense of the United States.

(4) General aviation contributes to well-paying jobs in the manufacturing and technology sectors in the United States and products produced by those sectors are exported in great numbers.

(5) Technology developed and proven in general aviation aids in the success and safety of all sectors of aviation and scientific competence.

(6) The average small airplane in the United States is now 40 years old and the regulatory barriers to bringing new designs to the market are resulting in a lack of innovation and investment in small airplane design.

(7) Since 2003, the United States lost 10,000 active private pilots per year on average, partially due to a lack of cost-effective, new small airplanes.

(8) General aviation safety can be improved by modernizing and revamping the regulations relating to small airplanes to clear the path for technology adoption and cost-effective means to retrofit the existing fleet with new safety technologies.

SEC. 3. SAFETY AND REGULATORY IMPROVEMENTS FOR GENERAL AVIATION.

(a) *IN GENERAL.*—Not later than December 15, 2015, the Administrator of the Federal Aviation Administration shall issue a final rule—

(1) to advance the safety and continued development of small airplanes by reorganizing the certification requirements for such airplanes under part 23 to streamline the approval of safety advancements; and

(2) that meets the objectives described in subsection (b).

(b) *OBJECTIVES DESCRIBED.*—The objectives described in this subsection are based on the recommendations of the Part 23 Reorganization Aviation Rulemaking Committee:

(1) The establishment of a regulatory regime for small airplanes that will improve safety and reduce the regulatory cost burden for the Federal Aviation Administration and the aviation industry.

(2) The establishment of broad, outcome-driven safety objectives that will spur innovation and technology adoption.

(3) The replacement of current, prescriptive requirements under part 23 with performance-based regulations.

(4) The use of consensus standards accepted by the Federal Aviation Administration to clarify how the safety objectives of part 23 may be met using specific designs and technologies.

(c) *CONSENSUS-BASED STANDARDS.*—In prescribing regulations under this section, the Administrator shall use consensus standards, as described in section 12(d) of the National Technology Transfer and Advancement Act of 1996 (15 U.S.C. 272 note), to the extent practicable while continuing traditional methods for meeting part 23.

(d) *SAFETY COOPERATION.*—The Administrator shall lead the effort to improve general aviation safety by working with leading aviation regulators to assist them in adopting a complementary regulatory approach for small airplanes.

(e) *DEFINITIONS.*—In this section:

(1) *CONSENSUS STANDARDS.*—

(A) *IN GENERAL.*—The term “consensus standards” means standards developed by an organization described in subparagraph (B) that may include provisions requiring that owners of relevant intellectual property have agreed to make that intellectual property available on a non-discriminatory, royalty-free, or reasonable royalty basis to all interested persons.

(B) *ORGANIZATIONS DESCRIBED.*—An organization described in this subparagraph is a domestic or international organization that—

(i) plans, develops, establishes, or coordinates, through a process based on consensus and using agreed-upon procedures, voluntary standards; and

(ii) operates in a transparent manner, considers a balanced set of interests with respect to such standards, and provides for due process and an appeals process with respect to such standards.

(2) *PART 23.*—The term “part 23” means part 23 of title 14, Code of Federal Regulations.

(3) *PART 23 REORGANIZATION AVIATION RULEMAKING COMMITTEE.*—The term “Part 23 Reorganization Aviation Rulemaking Committee” means the aviation rulemaking committee established by the Federal Aviation Administration in August 2011 to consider the reorganization of the regulations under part 23.

(4) *SMALL AIRPLANE.*—The term “small airplane” means an airplane which is certified to part 23 standards.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Kansas?

There was no objection.

A motion to reconsider was laid on the table.

OBAMACARE

(Mr. CANTOR asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. CANTOR. Mr. Speaker, millions of Americans are coming home and opening their mailboxes to find shocking news; their health care plans are being taken away from them.

The President broke a promise we knew he couldn't keep, and now millions of Americans feel betrayed, wondering why their health care plans are being canceled.

Mr. Speaker, this letter was sent to me by a constituent. His name is Bruno Gora, and he is a constituent of mine in Richmond, Virginia. He is a self-employed individual who purchases health insurance through Anthem BlueCross/BlueShield. A few weeks ago, he was stunned to receive this letter in the mail, and it clearly reads: “To meet the requirements of the new law, your current plan can no longer be offered.”

Any new plan could cost Mr. Gora thousands of dollars more. Why should he or anyone else be forced to buy a different insurance policy if they are happy with the one they have?

With every new day that passes, we continue to learn more and more about people in the same situation. Mr. Gora and this cancellation letter represent millions of ObamaCare victims across the country who are having their health insurance ripped away from them.

As a result, we House Republicans will put the Keep Your Plan Act on the floor for a vote tomorrow. The only way to stop every cancellation letter is by full repeal of this law. However, this bill will hopefully begin to ease some of the pain that working families are feeling because of President Obama's health care law.

Tomorrow, we will see who will put their constituents before policies and vote for a bill that could allow Americans to keep their plans.

I sincerely hope that my colleagues will act as a united voice and take the first of many steps to provide relief to the American people from the many burdens brought about by ObamaCare.

INDEPENDENT LIVING ENHANCEMENT ACT

(Ms. MICHELLE LUJAN GRISHAM of New Mexico asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. MICHELLE LUJAN GRISHAM of New Mexico. Mr. Speaker, on Veterans Day, I had the honor of speaking at a veterans ceremony in Albuquerque, where I was reminded of our solemn responsibility that we have as lawmakers to do everything we can do to stand up for those who stand up for us.

That is why last month I introduced the Veterans' Independent Living Enhancement Act, bipartisan legislation that will help disabled veterans live independently and participate in family and community life.

Currently, only 2,700 veterans in the entire country can enroll in the VA's highly successful Independent Living Program each year. When you compare that to the 2.6 million veterans of the Iraq and Afghanistan wars alone, it is clear that this number is far too low, preventing veterans from getting the services and support they need.

My bill, which has both Democratic and Republican cosponsors, along with the support of a dozen different veterans and health organizations, would remove this arbitrary cap so that every veteran who can participate in it would benefit from the Independent Living Program.

Mr. Speaker, I urge the House to fulfill its responsibility to our Nation's veterans and their families and take up this commonsense, bipartisan legislation.

OBAMACARE

(Mr. MCCARTHY of California asked and was given permission to address the House for 1 minute.)

Mr. MCCARTHY of California. Mr. Speaker, the President's announcement today does little to change the need for Congress to act.

The President's promise of "if you like your plan, you can keep it," is an empty promise. Sadly, 1 million Californians are now finding out firsthand in the form of a letter that their current plan has been canceled.

One of those 1 million Californians happens to be a constituent of mine from Bakersfield, California. He wrote me recently to tell me how ObamaCare has failed him. He writes:

Our youngest son was born with a rare genetic condition that results in severe mental retardation, an inability to walk or talk, and a need to be tube-fed directly into a surgically implanted port in his stomach.

Our longtime insurance carrier, Kaiser Permanente, has been great about caring for our son, who requires 24-hour care and special medication and formulas, all of which are very expensive.

Well, we just learned today that our previous coverage, not cheap by any means, with a premium of nearly \$1,000 a month, is no longer available, and that a far inferior replacement plan with less coverage and more out-of-pocket exposure will cost \$626 a month more, bringing our total to over \$1,600 a month.

With the added out-of-pocket expenses, we anticipate for his care in the coming year we expect to pay about \$24,000 more for care next year than this year, all thanks to ACA.

That is why we must take up and pass Keep Your Health Plan Act, and we ask the Democrats to join with us, to keep a pledge, to keep a promise, and stop increasing the cost for the constituents.

OBAMACARE

(Mrs. CAPPS asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Mrs. CAPPS. Mr. Speaker, I rise to tell the story of one of my constituents' experiences with the Affordable Care Act, Allan, from Santa Barbara County.

Prior to the Affordable Care Act, his wife was paying \$20,000 a year in insurance premiums. She has a preexisting condition. Even though it costs so much, she was thankful to have any coverage at all.

When Covered California, our online marketplace, opened, she made a call, looked at her options, and found a plan that works for her. This plan saved them \$8,000 a year, and it was a much better plan.

We know that the rollout nationally has been sloppy, that the law is not perfect, and that there are real issues we must fix. We must fix those problems without diminishing the true benefits the law is giving to families in my district and across the country. So now is the time to work together to ensure all Americans have access to quality, affordable health care.

OBAMACARE

(Mr. UPTON asked and was given permission to address the House for 1 minute.)

Mr. UPTON. Mr. Speaker, for the last 3 years, the President personally promised that if they liked their current health care plan, that they could keep it "no matter what," period.

But cancellation notices are now arriving in millions of mailboxes across

the country. In the great State of Michigan, some 225,000 folks will see their plans terminated because of this law. That is twice the number of people who have even tried to select a plan nationwide.

I have heard from countless families back home who took the President at his word. They are upset—yes, they are—and worried about how they are going to make ends meet.

A self-employed family of three in Bangor, Michigan, had purchased their own insurance for more than 30 years. Their BlueCross/BlueShield plan was working well, had no deductible, a \$750 monthly premium. To replace it, the premium is going to nearly double to \$1,393 and their deductible will jump to \$2,800. In their own words, they told us, they had been thrown under the bus. Sadly, they are not alone.

Tomorrow, we will vote on the Keep Your Health Plan Act, a straightforward, 1-page bill that says if you like your coverage, you ought to be able to keep it.

Let's keep that promise.

OBAMACARE

(Mr. CARTWRIGHT asked and was given permission to address the House for 1 minute.)

Mr. CARTWRIGHT. Mr. Speaker, I rise to share with you the story of a couple from Catasauqua, Pennsylvania, the Zakoses.

In a one-on-one session last Monday, that is, a week ago Monday, Beverly and Bob Zakos of Catasauqua sat as the navigator, Mr. Hartman, worked online through their application with them. This time, although they had had a prior bad experience, the online connection worked "like a charm," Hartman said. Once it is finished, the Zakoses will get a plan that will be more than \$500 a month less expensive than the COBRA coverage they had been purchasing for \$1,200, even without subsidies.

At 62 years old, Mr. Zakos is hoping that with some adjustments to his income and his wife's Medicare, he can qualify for hundreds more a month in subsidies. I take that from the Allentown Morning Call.

OBAMACARE

(Mrs. WALORSKI asked and was given permission to address the House for 1 minute.)

Mrs. WALORSKI. Mr. Speaker, I am pleased to cosponsor the Keep Your Health Plan Act to make sure individuals can keep the health care plans they like and need.

I have asked Hoosiers in the State of Indiana to share their stories with me about their experiences with ObamaCare. The stories are shocking.

Kathryn from South Bend got this letter from her insurance company stating that her plan will be canceled. Her monthly payments will increase from \$186 per month to \$329 per month—nearly double.